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ABSTRACT

This leaflet examines the impact of alcohol and other drug use in creating an unhealthy lifestyle for individuals with disabilities and placing them at risk for health and medical problems. The negative effects of even moderate amounts of alcohol are noted, and the hindering of rehabilitation efforts when a person with a disability is using alcohol or other drugs is pointed out. Behaviors associated with disabilities that are similar to the consequences of alcohol and other drug abuse are listed. A section titled "Did You Know That..." cites the impact of certain medications on the body's processing of alcohol and notes specific examples of the impact of alcohol in causing arthritis, bedsores, and fetal alcohol syndrome. Three organizational resources, a videotape, three training materials, and three references are listed as sources for more information. (JDD)

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A Look at Alcohol and Other Drug Abuse Prevention and...

DISABILITY AND HEALTH IMPLICATIONS

It is a well-known fact that people with disabilities tend to experience more medical and health-related problems than the general population. However, many people with disabilities do not require greater amounts of medical care. Instead, it is the disability in combination with an unhealthy lifestyle which places a person at risk for health and medical problems (Pope and Tarlov, 1991). One lifestyle risk involves the misuse of alcohol and other drugs. Even amounts of alcohol considered "moderate" for most people can have negative effects for someone with a disability. This is due to such factors as:

- regular use of medications;
- compromised circulation or metabolism; or
- unusual nervous system activity (e.g., spasticity, seizures, hyperactivity).

For people with disabilities who must take special precautions about their health, alcohol and other drug misuse can increase the risk for chronic health problems, and place them at risk for secondary disabilities.

Disability-related medical care in the United States has been estimated to cost $120 billion per year (Pope and Tarlov, 1991). The unidentified alcohol and other drug abuser within the health systems substantially raises these costs. Problems associated with alcohol and other drug abuse and disability affect many large systems including medical rehabilitation, special education, centers for independent living, vocational rehabilitation, and worker compensation. Screening and identification of alcohol and other drug abuse problems must be an integral part of these services to better serve those in need, to reduce the risk of secondary disabilities, and to maintain cost-effective services.

> "Disability management and rehabilitation success requires commitment, tenacity, energy, and endurance. These attributes become suppressed and vanish with the use of alcohol and other controlled substances. Rehabilitation requires sobriety."
>
> **— James S. Jeffers**
> Assistant Superintendent for
> Vocational Rehabilitation, Maryland

Medical and other rehabilitation efforts can be severely hindered when a person with a disability is overmedicated, abusing, or using even small quantities of alcohol or other drugs (Heinemann, et al., 1989). Cognition, mobility, stamina, and interpersonal skills are all adversely affected. Rehabilitation staff do not always recognize alcohol and other drug abuse problems in their patients because some behaviors associated with disabilities are similar to the consequences of alcohol and other drug abuse, such as:

- missed appointments,
- drowsiness,
- impaired memory,
- affected speech or gait.

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Resource Center on Substance Abuse Prevention and Disability ■ 1331 F Street N.W., Suite 800 ■ Washington, DC 20004
Voice (202)783-2900 ■ TDD (202)737-0645 ■ Fax (202)737-0725

Moreover, health care professionals often do not perceive alcohol and other drug abuse identification as their responsibility. Unfortunately, this attitude shields the person with a disability from negative consequences, perpetuating the alcohol and other drug abuse.

One societal misperception is that people with disabilities are sick or unhealthy. This misperception tends to mask the true reasons behind some medical complications. For their part, physicians frequently have limited information regarding those patients with disabilities who are most at risk for developing alcohol and other drug abuse problems. Also, these practitioners have limited means for identifying patients who have acquired the same medication from other physicians. Sometimes, as a consequence, medications are abused because of their abundance, or they are traded for alcohol or other drugs.

Perhaps the greatest challenge to health care professionals, disability specialists, families, and society in general is to look beyond the disability and assess the underlying causes for recurring medical problems. Frequently, alcohol and other drug abuse will remain hidden behind a disability until specific questions are asked.

The prevalence of alcohol-related problems in persons with physical disabilities has emerged as an issue in medicine and physical rehabilitation. Physicians, rehabilitation specialists and service providers increasingly are aware that alcohol abuse not only can contribute to the onset of disability, but can undermine the rehabilitation process by impairing the learning process and increasing morbidity.

—Allen W. Heinemann, Ph.D.
Associate Professor, Department of Physical Medicine and Rehabilitation
Northwest University Medical School
Chicago, IL

Resources: *JR's Story: The Disability of Chemical Dependency* is a video which chronicles one year in the life of a young man with quadriplegia following an arrest for drug trafficking. To order, contact Aims Media, 9710 DeSoto Ave., Chatsworth, CA 91311. Phone: (800) 367-2467.

The Substance Abuse Assessment and Education Kit was developed for professionals working in the field of traumatic brain injury. It contains useful clinical materials and research information intended to help identify substance abusers, develop effective plans for education and prevention, and assist in policy-making efforts. For more information, contact Rehabilitation Research and Training Center on Severe Traumatic Brain Injury, Box 434 MCV Station, Richmond, VA 23298-0434. Phone: (804) 786-7290

The Substance Abuse Prevention Project has developed training material for rehabilitation staff serving persons with a traumatic injury, those addicted and their families. The material is appropriate for adults and teens. To order, contact the Rehabilitation Institute of Chicago, 448 E. Ontario #650, Chicago, IL 60611. Phone (312) 908-2802.

Training Manual for Professionals; Substance Abuse and Disability Issues. This manual can be used for self directed education or group training. Contact Substance Abuse Resources for Disabled Individuals, Department of Community Health, School of Medicine, Wright State University, Dayton, OH 45435. Phone: (513) 873-3588.

DID YOU **KNOW** THAT...

the definition of 'heavy alcohol use' is dependent, among other things, on the nature of the disability and the types of medications being used?

For the "average" person without a disability, the body is able to process approximately one drink per hour (one shot of whiskey, one 12 oz can of beer). For this person, consuming several drinks in the course of an evening may not be considered excessive. However, a person taking medications, such as muscle relaxers (Flexeril, Soma or Robaxin) to control spasms will experience the side effects of heavy alcohol consumption after only one or two drinks. The same reactions may occur when alcohol is consumed with antidepressants, sedatives, and other drugs commonly prescribed for people with specific disabilities.

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alcohol use can be directly implicated in some forms of arthritis?

Of the many forms of arthritis, some are associated with alcohol abuse. Gout is one form of arthritis associated with alcohol abuse. Gout is marked by an excess of uric acid in the blood and painful inflammation of the joints. At least one form of arthritis of the hip also is strongly associated with excess alcohol consumption.

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bedsores, or decubitus ulcers, can be caused by frequent alcohol or other drug use?

People who have serious mobility limitations spend much of their time sitting or lying down. If a person is frequently under the influence, it is far less likely that pressure release exercises will be conducted on time to relieve excess stress on body pressure points. Failure to follow pressure release procedures can cause ulcerations on the body. Sometimes these ulcerations extend all the way to the bone. It can take over $50,000 and many months to heal a single bedsore.

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the use of hallucinogens can be especially dangerous for people with spinal cord injuries?

People with spinal cord injuries who have experimented with hallucinogens report a number of very serious side-effects. These include hyperventilation, greater spasticity and high body temperature, as well as the absence of the typical "high."

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among some leading causes of mental retardation, Fetal Alcohol Syndrome (FAS), is the most preventable?

FAS is currently one of the leading causes of mental retardation in the United States. This condition can be entirely prevented if women abstain from alcohol and other drugs during pregnancy. There is no known "safe" amount of alcohol which can be consumed without damaging the fetus. Common features associated with FAS include reduced growth rate, impaired cognitive functioning, abnormalities in body features, and behavioral problems.

For More INFORMATION

Resources

Include, but are not limited to, the following:

Abbott Northwestern Hospital
Sister Kenny Institute
800 East 28th Street
Minneapolis, MN 55407
(612) 863-5061

Mediplex Rehab - Denver
The Bridge Recovery Program
8451 Pearl Street
Thornton, CO 80229
(800) 486-1017
(303) 288-3000

Rehabilitation Institute of Chicago
448 E. Ontario
Room 605
Chicago, IL 60611
(312) 908-2802

References

Heinemann, A.W., Doll, M., and Schnoll, S. (1989). Treatment of alcohol abuse in people with recent spinal cord injuries. *Alcohol Health and Research World*, 13(2), 110-117.

Pope, A.M., and Tarlov, A.R. (Eds.) (1991). *Disability in America: Toward a National Agenda for Prevention.* Washington, DC: National Academy Press.

Schaschl, S. and Straw, D. (1989). Results of a model intervention program for physically impaired persons. *Alcohol Health and Research World*, 13 (2).

This information was developed as a part of a set of materials on alcohol and other drug abuse prevention and disability. Other documents on specific topics are available upon request. Some examples are: A Look at Alcohol and Other Drug Abuse Prevention and...Americans with Disabilities, Attention Deficit Disorder, Blindness and Visual Impairments, Deafness and Hearing Loss, Hidden Disabilities, Learning Disabilities, Mental Illness, Mental Retardation, Mobility Limitations, Traumatic Brain Injury, Disability and Enabling, Disability and the Family, Disability and Health Implications, Service Delivery Settings, and Symptoms Checklist.
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